

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **307055** (4)
1. Corporation Name
MEDENWALD INCORPORATED



2. Principal Place of Business
**2331-1 BRUNER LN
FT MYERS FL 33912**

3. Mailing Address
**2331-1 BRUNER LN
FT MYERS FL 33912**

21. Principal Place of Business

2a. Mailing Address

22. State, Zip, City & State

26. State, Zip, City & State

23. City & State

27. City & State

24. Zip, City & State

28. Zip, City & State

9. Name and Address of Current Registered Agent

**VOTAW, ROBERT W.
2331-1 BRUNER LN
FORT MYERS FL 33912**

81. Name

82. Street Address (P.O. Box Number is Not Accepted)

83.

84. City

FL 85. Zip Code

11. For each of the provisions of the Florida Statutes, Chapter 190, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the office to be set forth in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am hereby authorized to register the corporation of Florida in accordance with Florida Statutes.

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

- 12.1 Name: **STD VOTAW, ROBERT W, JR** [] DELETED
- 12.2 Address: **1240 WALES DRIVE FORT MYERS, FLORIDA 00000**
- 12.3 Name: **D MEDENWALD, RHODA** [] DELETED
- 12.4 Address: **BEACH PKWY CAPE CORAL FL**
- 12.5 Name: **V VOTAW, ROBERT W, JR** [] DELETED
- 12.6 Address: **1240 WALES DRIVE FORT MYERS, FLORIDA 00000**
- 12.7 Name: **PD MEDENWALD, GARY** [] DELETED
- 12.8 Address: **151 S.W. 51ST ST. CAPE CORAL FL**
- 12.9 Name: **VD DELAGO, PIERRE** [] DELETED
- 12.10 Address: **7150 SHANNON BLVD FT MYERS, FL 00000**
- 12.11 Name: **V VOTAW, ROBERT W, JR** [] DELETED
- 12.12 Address: **1240 WALES DR FT MYERS FL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

- 13.1 Name: [] Change [] Addition
- 13.2 Address: [] Change [] Addition
- 13.3 Name: [] Change [] Addition
- 13.4 Address: [] Change [] Addition
- 13.5 Name: [] Change [] Addition
- 13.6 Address: [] Change [] Addition
- 13.7 Name: [] Change [] Addition
- 13.8 Address: [] Change [] Addition
- 13.9 Name: [] Change [] Addition
- 13.10 Address: [] Change [] Addition
- 13.11 Name: [] Change [] Addition
- 13.12 Address: [] Change [] Addition

14. I hereby certify that the information supplied to the filing agency is true and correct and does not apply for the corporation stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information furnished by this corporation is not subject to financial reporting and that my signature shall have the same legal effect as if made under oath. This information is provided for the purpose of filing as provided to comply with the report as required by Chapter 605, Florida Statutes; and that my name appears on the Florida Department of State's public information website.

SIGNATURE: *R. W. Votaw*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-96

941 481-0230

CR2E034 (12/95)